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LAURENCE MICHAEL SUSINI, M.D.

In the Matter of

Holder of License No. 17611 For the Practice of Allopathic Medicine In the State of Arizona

Case No. MD-06-0408A

CONSENT AGREEMENT FOR LETTER OF REPRIMAND

CONSENT AGREEMENT

By mutual agreement and understanding, between the Arizona Medical Board ("Board") and Laurence Michael Susini, M.D. ("Respondent"), the parties agreed to the following disposition of this matter.

- Respondent has read and understands this Consent Agreement and the stipulated Findings of Fact, Conclusions of Law and Order ("Consent Agreement"). Respondent acknowledges that he has the right to consult with legal counsel regarding this matter.
- 2. By entering into this Consent Agreement, Respondent voluntarily relinquishes any rights to a hearing or judicial review in state or federal court on the matters alleged, or to challenge this Consent Agreement in its entirety as issued by the Board, and waives any other cause of action related thereto or arising from said Consent Agreement.
- 3. This Consent Agreement is not effective until approved by the Board and signed by its Executive Director.
- The Board may adopt this Consent Agreement of any part thereof. This Consent Agreement, or any part thereof, may be considered in any future disciplinary action against Respondent.
- This Consent Agreement does not constitute a dismissal or resolution of other matters currently pending before the Board, if any, and does not constitute any waiver,

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express or implied, of the Board's statutory authority or jurisdiction regarding any other pending or future investigation, action or proceeding. The acceptance of this Consent Agreement does not preclude any other agency, subdivision or officer of this State from instituting other civil or criminal proceedings with respect to the conduct that is the subject of this Consent Agreement.

- 6. All admissions made by Respondent are solely for final disposition of this matter and any subsequent related administrative proceedings or civil litigation involving the Board and Respondent. Therefore, said admissions by Respondent are not intended or made for any other use, such as in the context of another state or federal government regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or any other state or federal court.
- Upon signing this agreement, and returning this document (or a copy thereof) to the Board's Executive Director, Respondent may not revoke the acceptance of the Consent Agreement. Respondent may not make any modifications to the document. Any modifications to this original document are ineffective and void unless mutually approved by the parties.
- 8. If the Board does not adopt this Consent Agreement, Respondent will not assert as a defense that the Board's consideration of this Consent Agreement constitutes bias, prejudice, prejudgment or other similar defense.
- This Consent Agreement, once approved and signed, is a public record that will be publicly disseminated as a formal action of the Board and will be reported to the National Practitioner Data Bank and to the Arizona Medical Board's website.
- 10. If any part of the Consent Agreement is later declared void or otherwise unenforceable, the remainder of the Consent Agreement in its entirety shall remain in force and effect.

Any violation of this Consent Agreement constitutes unprofessional conduct and may result in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order, probation, consent agreement or stipulation issued or entered into by the board or its executive director under this chapter") and 32-1451.

DATED:

FINDINGS OF FACT

- 1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.
- 2. Respondent is the holder of license number 17611 for the practice of allopathic medicine in the State of Arizona.
- 3. The Board initiated case number MD-06-0408A after receiving notification of a malpractice settlement involving Respondent's care and treatment of a ten year-old female patient ("MJ").
- 4. On April 13, 2000, after falling from a chair, MJ had tenderness in her forearm and presented to Respondent for evaluation of fractures of the radius and ulnar of her right proximal forearm that occurred in 1998. Respondent ordered an x-ray that revealed a non-displaced fracture of both the radius and ulnar of the right forearm. Respondent placed MJ in a long arm fiberglass cast and scheduled her for repeat x-rays in one week.
- 5. When MJ saw Respondent on April 21, 2000 she complained of no pain. The x-rays taken on that date revealed a 30 degree fracture angulation. Respondent noted the x-rays of MJ's arm in a cast were acceptable and the angulation of the fracture was mild. Respondent considered open reduction, but was concerned about the potential for injury to the posterior interosseus nerve. Respondent did not consider a closed reduction technique. On May 26, 2000 Respondent removed MJ's cast and noted her bone fractures were well healed. Respondent instructed MJ to modify her activity for two weeks and return if she had any problems.
- 6. On August 27, 2001 MJ presented to an orthopedic surgeon ("Surgeon") complaining of stiffness and pain in her forearm. Surgeon noted MJ had only 5 to 10 degrees pronation and supination, respectively, and could pronate her arm to write.

Surgeon noted on x-ray MJ had a severe volar bow of the radius. His impression was a mal-union of the radius fracture with loss of rotation. Surgeon recommended multiple osteotomies to correct the problem.

- 7. On October 12, 2001 Surgeon performed an open osteoclasis of MJ's proximal radius and applied a cast. However, x-ray reports dated October 22, 2001 still showed considerable bowing of the radius. Surgeon removed MJ's cast on November 14, 2001 and instructed her to undergo physical therapy. By January 7, 2002 MJ developed 55 degrees pronation and 60 degrees supination and her radius gradually remodeled in 2004 and 2005. However, MJ experienced persistent loss of pronation and supination and, by December 2005, had only 15 degrees of each.
- 8. The standard of care when evaluating a pediatric patient with an angulated fracture of the proximal forearm greater than 20 degrees required Respondent to appreciate the degree of angulation and consider a closed reduction.
- 9. Respondent deviated from the standard of care by noting MJ's 30 degree angulation to be acceptable and by casting the fracture without considering a closed reduction.
- 10. MJ was harmed because her fracture healed with volar angulation and her rotation was markedly limited. Another physician unsuccessfully attempted to surgically correct MJ's mal-union.

CONCLUSIONS OF LAW

- 1. The Board possesses jurisdiction over the subject matter hereof and over Respondent.
- 2. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(q) ("[a]ny conduct or practice that is or might be harmful or dangerous to the health of the patient or the public;") and A.R.S. § 32-1401

' '	1 (27) (ii) ([G]ONUUCI IIIal IIIe board determines is gross negligence, repealed negligence of
2	negligence resulting in harm to or the death of a patient.").
3	<u>ORDER</u>
4	IT IS HEREBY ORDERED THAT:
5	Respondent is issued a Letter of Reprimand for failing to appreciate the
6	degree of angulation and for failure to consider a closed reduction.
7	2. This Order is the final disposition of case number MD-06-0408A.
8	DATED AND EFFECTIVE this day of, 2008.7
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10	ARIZONA MEDICAL BOARD
11	(SEAL)
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13	TIMOTHY C.MILLER, J.D.
14	Executive Director
15	ORIGINAL of the foregoing filed this
16	Arizona Medical Board
17	9545 E. Doubletree Ranch Road Scottsdale, AZ 85258
18	EXECUTED COPY of the foregoing mailed
19	this <u>9th</u> day of <u>February</u> , 2006 to:
20	Laurence Michael Susini, M.D. Address of Record
21	Address of Record
22	EM'Gran
23	Investigational Review
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